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| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| SOUTHERN DISTRICT OF NEW YORK | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | t 1: Identify Yourself | | | |
|----|---|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture | Courtney First name A. Middle name | | First name Middle name |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8559 | | |

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Debtor 1 Courtney A. Upshaw

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|--|---|---|--|--|--|--|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 950 East 447th Street Appriment 21 | If Debtor 2 lives at a different address: | | | |
| | | 869 East 147th Street, Apartment 3J Bronx, NY 10455 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Bronx | Number, Street, City, State & ZIP Code | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

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| | | Pg 3 of 52 | |
|----------|--------------------|------------|------------------------|
| Debtor 1 | Courtney A. Upshaw | 3 | Case number (if known) |

| Part | Tell the Court About | Your Ba | ankruptcy Ca | ase | | | |
|------|---|--|----------------------|---|---|---|------------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Ba e box. | nkruptcy |
| | choosing to file under | ■ Chapter 7 | | | | | |
| | | ☐ Ch | apter 11 | | | | |
| | | ☐ Ch | napter 12 | | | | |
| | | ☐ Ch | napter 13 | | | | |
| | | | | | | | |
| 8. | How you will pay the fee | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | |
| | | | | | allments. If you choose this option (Official Form 103A). | on, sign and attach the Application for Individua | als to Pay |
| | | | I request that | at my fee be wai | ved (You may request this option | n only if you are filing for Chapter 7. By law, a j | |
| | | | applies to yo | ur family size and | d you are unable to pay the fee ir | ur income is less than 150% of the official poven installments). If you choose this option, you not like the state of the | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes | | | VA/In a ra | Coop number | |
| | | | District | | | 0 | |
| | | | District District | | When When | Case number Case number | |
| | | | District | _ | willen | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your | □ No. | . Go to I | ine 12. | | | |
| | residence? | ■ Yes | s. Has yo | our landlord obtai | ned an eviction judgment agains | t you? | |
| | | | • | No. Go to line 1 | 2. | | |
| | | | _ | Yes. Fill out <i>Init</i> bankruptcy peti | | Judgment Against You (Form 101A) and file it | with this |
| | | | | 1 7 1 - 2 | | | |

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| Deb | tor 1 | Courtney A. Upsha | aw | · · | Pg 4 of 52 Case number (if known) |
|------|-----------------------|--|----------|------------------------|--|
| | | | | | |
| Part | 3: | Report About Any Bu | sinesses | You Owi | n as a Sole Proprietor |
| 12. | of an | ou a sole proprietor y full- or part-time ness? | ■ No. | Go to | Part 4. |
| | | | ☐ Yes. | Name | e and location of business |
| | A sol | e proprietorship is a | | | |
| | an in sepa as a | ness you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. | | Name | e of business, if any |
| | If you | I have more than one proprietorship, use a rate sheet and attach | | Numl | ber, Street, City, State & ZIP Code |
| | | his petition. | | Chec | k the appropriate box to describe your business: |
| | | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) |
| | | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) |
| | | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) |
| | | | | | None of the above |
| 13. | Chap Bank | you filing under oter 11 of the cruptcy Code and are a small business or? | déadline | s. If you inns, cash-f | der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B). |
| | | definition of small | ■ No. | I am | not filing under Chapter 11. |
| | | ness debtor, see 11 C. § 101(51D). | □ No. | I am t | filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy e. |
| | | | ☐ Yes. | I am | filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code |
| Part | 4: | Report if You Own or | Have Any | / Hazardo | ous Property or Any Property That Needs Immediate Attention |
| 14. | | ou own or have any | ■ No. | | |
| | | erty that poses or is ed to pose a threat | ☐ Yes. | | |
| | _ | minent and | □ res. | What is | the hazard? |

identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Courtney A. Upshaw

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Courtney A. Upshaw Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Courtney A. Upshaw Signature of Debtor 2 Courtney A. Upshaw Signature of Debtor 1 Executed on October 30, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Courtney A. Upshaw Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Daniel M. Katzner | Date | October 30, 2019 |
|--|---------------|-------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Daniel M. Katzner 4305116 Printed name | | |
| The Law Offices of Daniel M. Katzner, P.C. | | |
| 1025 Longwood Avenue Bronx, NY 10459-5105 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (718) 589-3999 | Email address | danielkatzner@yahoo.com |
| 4305116 NY | | |
| Bar number & State | | |

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| Fill in this infor | mation to identify your | casa. | FU O OI J | |
|------------------------|--------------------------|-------------------|-------------|--------------------------------------|
| | madon to lucitiny your | case. | | |
| Debtor 1 | Courtney A. Upsl | haw | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| you | toriginal forms, you must fill out a new Summary and check the box at the top of this page. | | |
|------|--|--------------|---------------------------|
| · an | | Your a | essets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,207.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 5,207.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 19,679.00 |
| | Your total liabilities | \$ | 19,679.00 |
| Par | t3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 2,049.40 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,489.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other scl | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Courtney A. Upshaw

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,243.01 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cla | aim |
|--|-----------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 2,852.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 2,852.00 |

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| | | | Pa 10 of 52 | 7.00.01 Wa | Boodinone |
|---|---|---|---|----------------------|--|
| Fill in this infor | nation to identify your case a | nd this filing: | | | |
| Debtor 1 | Courtney A. Upshaw First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| | nkruptcy Court for the: SOUT | | | | |
| | | | | | _ |
| Case number _ | | | | | ☐ Check if this is an amended filing |
| | | | | | |
| _ | <u>rm 106A/B</u> | | | | |
| <u>Schedul</u> | e A/B: Property | / | | | 12/15 |
| think it fits best. B information. If mor Answer every ques | e as complete and accurate as po e space is needed, attach a separ | ossible. If two married ate sheet to this form | nce. If an asset fits in more than one d people are filing together, both are n. On the top of any additional pages You Own or Have an Interest In | equally responsible | for supplying correct |
| 1. Do you own or I | nave any legal or equitable interes | st in any residence, b | uilding, land, or similar property? | | |
| ■ No. Go to Par | | • • | 5 , , 11, | | |
| Yes. Where i | | | | | |
| | , | | | | |
| Part 2: Describe | Your Vehicles | | | | |
| Do vou own. lea: | se, or have legal or equitable | interest in any veh | icles, whether they are registere | ed or not? Include a | any vehicles you own that |
| | | | le G: Executory Contracts and Une | | , |
| 3. Cars, vans, tr | ucks, tractors, sport utility ve | hicles, motorcycle | s | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | | | al vehicles, other vehicles, and a sels, snowmobiles, motorcycle acc | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | | | | _ | |
| | | | tries from Part 2, including any | | \$0.00 |
| Part 3: Describe | Your Personal and Household Ite | ems | | L | |
| | nave any legal or equitable in | | following items? | | Current value of the |
| | | | | | portion you own? Do not deduct secured claims or exemptions. |
| | oods and furnishings ajor appliances, furniture, linens | , china, kitchenware | | | · |
| Yes. Desc | ribe | | | | |
| | Misc. househole | d goods and furn | niture | | \$1,775.00 |
| | | | | | |
| 7. Electronics | | | | | |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

□ No

Official Form 106A/B Schedule A/B: Property page 1

19-13553-smb Doc 1 Filed 11/05/19 Entered 11/05/19 08:03:51 Main Document Pg 11 of 52 Debtor 1 Case number (if known) Courtney A. Upshaw Yes. Describe..... \$1,400.00 Misc. used electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Misc. used clothing \$950.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4.125.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

□ No

Yes.....

Cash

\$275.00

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| 17. Decision of money Examples: Theselving, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar No. | Debtor 1 | Courtney A. Upshaw | | Case number (if known) | |
|--|---------------------------|---|---|--|---------------------|
| Tr.1. Checking & Saving Chase \$200.00 | | mples: Checking, savings, or other financial acco | | in credit unions, brokerage houses, an | d other similar |
| 17.1. Checking & Saving 17.2. Checking & Saving 18. Checking & Saving 18. Checking & Saving 18. Checking & Saving 18. Checking & Saving 19. Checking | ☐ No | | | | |
| 17.2. Checking & Saving Municipal Credit Union \$15.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No | ■ Ye | 25 | Institution name: | | |
| Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No | | 17.1. Checking & Sav | ring Chase | | \$200.00 |
| Examples: Bond funds, investment accounts with brokerage firms, money market accounts No | | 17.2. Checking & Sav | ving Municipal Credit Union | | \$15.00 |
| Yes. Institution or issuer name: | Exa | mples: Bond funds, investment accounts with bro | okerage firms, money market accour | nts | |
| No Yes. Give specific information about them | | t de d | name: | | |
| Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name: 401(k) Wells Fargo and Company 401(k) Plan \$42.00 Pension Fidelity Retirement Plan \$550.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes | join ■ No | t venture | · | esses, including an interest in an LL | C, partnership, and |
| Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No | ⊔ Ye | | | % of ownership: | |
| Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name: 401(k) Wells Fargo and Company 401(k) Plan \$42.00 Pension Fidelity Retirement Plan \$550.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes | Neg Nor ■ No | notiable instruments include personal checks, cas in-negotiable instruments are those you cannot tra included in truments are those you cannot tra included instruments are those you cannot train a second in the s | shiers' checks, promissory notes, and | d money orders. | |
| Pension Fidelity Retirement Plan \$550.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes | <i>Exa</i> □ No | mples: Interests in IRA, ERISA, Keogh, 401(k), 4 os. List each account separately. | | er pension or profit-sharing plans | |
| Pension Fidelity Retirement Plan \$550.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes | | ,, | | ny 401(k) Plan | \$42.00 |
| 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes | | 401(K) | wells Fargo and Compa | 111y 401(k) Flaii | \$42.00 |
| Your share of all unused deposits you have made so that you may continue service or use from a company <i>Examples:</i> Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes. Institution name or individual: 3. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes. Issuer name and description. 4. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Yes. Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit | | Pension | Fidelity Retirement Plan | | \$550.00 |
| Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes | You Exa | r share of all unused deposits you have made so mples: Agreements with landlords, prepaid rent, | | | ers |
| No Yes | □ Ye | S | Institution name or individual | : | |
| Yes | _ | ` ' ' ' ' | y to you, either for life or for a numb | per of years) | |
| 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Yes | | | | | |
| Yes | 24. Inter 26 U. | ests in an education IRA, in an account in a qu S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | ualified ABLE program, or under a | a qualified state tuition program. | |
| | | | n. Separately file the records of any | interests.11 U.S.C. § 521(c): | |
| No. | 25. Trus | ets, equitable or future interests in property (o | ther than anything listed in line 1) | , and rights or powers exercisable f | or your benefit |
| ☐ Yes. Give specific information about them | ■ No | | | | |

19-13553-smb Doc 1 Filed 11/05/19 Entered 11/05/19 08:03:51 Main Document Pg 13 of 52 Case number (if known) Debtor 1 Courtney A. Upshaw 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here......

\$1,082.00

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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\$0.00

Copy personal property total

\$5,207.00

Official Form 106A/B Schedule A/B: Property page 5

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$5,207.00

\$5,207.00

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| Fill in this information to identify your case: | | | | | | |
|---|--------------------------|-------------------|-------------|--|------------------------------------|--|
| Debtor 1 | Courtney A. Upsl | naw | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | | |
| Case number (if known) | | | | | Charle if this is an | |
| (II KIIOWII) | | | | | Check if this is an amended filing | |
| | | | | | amended ming | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal pophankruptcy exemptions 11 U.S.C. § 522(b)(3)

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | ■ You are claiming federal exemptions. 11 L | J.S.C. § 522(b)(2) | | 3 3 3 4 4 5 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 | | | | |
|----|--|-------------------------------------|--|---|------------------------------------|--|--|--|
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | | | ount of the exemption you claim | Specific laws that allow exemption | | | |
| | | Copy the value from Schedule A/B | | | | | | |
| | Misc. household goods and furniture Line from Schedule A/B: 6.1 | \$1,775.00 | | \$1,775.00 | 11 U.S.C. § 522(d)(3) | | | |
| | Line IIIIII Schedule AV.B. V.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Misc. used electronics Line from Schedule A/B: 7.1 | \$1,400.00 | | \$1,400.00 | 11 U.S.C. § 522(d)(3) | | | |
| | Line Holli Golledale AVD. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Misc. used clothing Line from Schedule A/B: 11.1 | \$950.00 | | \$950.00 | 11 U.S.C. § 522(d)(3) | | | |
| | Line IIIIII Schedule AV.B. 1111 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Cash Line from Schedule A/B: 16.1 | \$275.00 | | \$275.00 | 11 U.S.C. § 522(d)(5) | | | |
| | Line noin <i>Schedule Alb.</i> 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Checking & Saving: Chase Line from Schedule A/B: 17.1 | \$200.00 | | \$200.00 | 11 U.S.C. § 522(d)(5) | | | |
| | LINE HOTH SCHEUUIE PAD. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | |

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Debtor 1 Courtney A. Upshaw

Case number (if known)

| | Courtiley A. Opsilaw | | | | |
|-----|---|---|-----|---|------------------------------------|
| | ef description of the property and line on hedule A/B that lists this property | Current value of the Amount of the exemption you claim Specific laws that allow exe portion you own | | | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | necking & Saving: Municipal Credit | \$15.00 | | \$15.00 | 11 U.S.C. § 522(d)(5) |
| | e from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 1(k): Wells Fargo and Company 1(k) Plan | \$42.00 | | \$42.00 | 11 U.S.C. § 522(d)(12) |
| | e from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | ension: Fidelity Retirement Plan | \$550.00 | | \$550.00 | 11 U.S.C. § 522(d)(12) |
| LII | le IIOIII Scriedule A/D. 21.2 | | | 100% of fair market value, up to any applicable statutory limit | |

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| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|----------------|
| Debtor 1 | Courtney A. Upsl | naw | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | ☐ Check if thi |
| | | | | amended fi |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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| | | | Pa | 18 of 52 | | | |
|---|---|---|--|--|--|--|--|
| Fill in th | is information to identi | fy your case: | | | | | |
| Debtor 1 | Courtney A | A. Upshaw | | | | | |
| | First Name | Middle | Name | Last Name | | | |
| Debtor 2 (Spouse if, | filing) First Name | Middle | e Name | Last Name | | | |
| United S | tates Bankruptcy Court f | or the: SOUTHE | RN DISTRICT OF N | IEW YORK | | | |
| Case nul | mber | | | | | _ | neck if this is an nended filing |
| Sched | l Form 106E/F lule E/F: Credit | | | | | | 12/15 |
| any execu Schedule Schedule left. Attach name and | tory contracts or unexpire G: Executory Contracts at D: Creditors Who Have Cl of the Continuation Page to case number (if known). | ed leases that could re nd Unexpired Leases aims Secured by Prop o this page. If you hav | esult in a claim. Also (Official Form 106G). perty. If more space is e no information to re | list executory of Do not include needed, copy to | Part 2 for creditors with NON contracts on Schedule A/B: Pany creditors with partially sithe Part you need, fill it out, roon on tile that Part. On the to | roperty (Officia ecured claims t number the entr | Il Form 106A/B) and on that are listed in ries in the boxes on the |
| Part 1: | List All of Your PRIO | | | | | | |
| _ | ny creditors have priority | unsecured ciaims aga | inst you? | | | | |
| | o. Go to Part 2. | | | | | | |
| □ Ye | 9S. | | | | | | |
| Part 2: | List All of Your NON | PRIORITY Unsecure | ed Claims | | | | |
| 3. Do ar | y creditors have nonprior | rity unsecured claims | against you? | | | | |
| □ No | o. You have nothing to repo | rt in this part. Submit th | is form to the court with | h your other sche | edules. | | |
| ■ Ye | es. | | | | | | |
| unsec | cured claim, list the creditor one creditor holds a particul | separately for each clai | im. For each claim liste | ed, identify what t | holds each claim. If a credit ype of claim it is. Do not list cla three nonpriority unsecured cl | ims already incl | uded in Part 1. If more |
| rarez | • | | | | | | Total claim |
| 4.1 | AT&T | | Last 4 digits of ac | count number | 9918 | | \$143.00 |
| | Nonpriority Creditor's Name PO Box 8212 Aurora, IL 60572 | | When was the del | | Various dates in or b | efore 2017 | |
| | Number Street City State Zip Who incurred the debt? Cl | | As of the date you | ı file, the claim i | s: Check all that apply | | |
| I | Debtor 1 only | | ☐ Contingent | | | | |
| [| Debtor 2 only | | ☐ Unliquidated | | | | |
| [| Debtor 1 and Debtor 2 or | nly | ☐ Disputed | | | | |
| [| At least one of the debto | rs and another | Type of NONPRIO | RITY unsecured | d claim: | | |
| | ☐ Check if this claim is fo | or a community | ☐ Student loans | | | | |
| | lebt s the claim subject to offs | et? | Obligations aris | | ration agreement or divorce the | at you did not | |
| I | No | | ☐ Debts to pension | n or profit-sharin | g plans, and other similar debt | S | |
| [| ☐Yes | | Other. Specify | Telephone | bills | | |

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| Courtney A. Upshaw | | Case number (if known) | | | |
|--|---|---|----------|--|--|
| Capital One | Last 4 digits of account number | 3268 | \$981.00 | | |
| Nonpriority Creditor's Name PO Box 30281 Solt Loke City LIT 94120 | When was the debt incurred? | Various dates in or before 2017 | | | |
| Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | |
| Yes | Other. Specify Credit card | l purchases | | | |
| Capital One | Last 4 digits of account number | 6382 | \$535.00 | | |
| Nonpriority Creditor's Name PO Box 30281 | When was the debt incurred? | Various dates in or before 2017 | | | |
| Salt Lake City, UT 84130 Number Street City State Zip Code | As of the data way file the plains | in Ob all that and | | | |
| Who incurred the debt? Check one. | As of the date you file, the claim | із. Спеск ан тат арріу | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | | | |
| ☐ Yes | Other. Specify Credit card | l purchases | | | |
| Capital One | Last 4 digits of account number | 5266 | \$476.00 | | |
| Nonpriority Creditor's Name PO Box 30281 | When was the debt incurred? | Various dates in or before 2019 | | | |
| Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| □Yes | Other. Specify Credit card | l purchases | | | |

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| Courtney A. Upshaw | | Case number (if known) | |
|---|---|--|----------|
| Citibank | Last 4 digits of account number | 0407 | \$822.00 |
| PO Box 6241 | When was the debt incurred? | Various dates in or before 2017 | |
| Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | Contingent | | |
| | _ | | |
| | <u> </u> | | |
| • | • | d claim: | |
| | ☐ Student loans | | |
| debt Is the claim subject to offset? | | aration agreement or divorce that you did not | |
| • | <u>-</u> ' ' | ng plans, and other similar debts | |
| ☐ Yes | Other Specify Credit card | d purchases | |
| Comenity Bank / NWYRK & Co | Last 4 digits of account number | 3049 | \$825.00 |
| PO Box 182789 | When was the debt incurred? | Various dates in or before 2017 | |
| | As of the date you file, the claim | | |
| Who incurred the debt? Check one. | • , | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit card | d purchases | |
| Comenity Bank / Torrid | Last 4 digits of account number | 2810 | \$840.00 |
| PO Box 182789 | When was the debt incurred? | Various dates in or before 2017 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| | - | | |
| | | | |
| _ | • | d claim: | |
| <u></u> | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| □Yes | ■ Other. Specify Credit card | d purchases | |
| | Citibank Nonpriority Creditor's Name PO Box 6241 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Comenity Bank / NWYRK & Co Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Comenity Bank / Torrid Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Claim Subject to Offset? Debtor 1 only Debtor 2 only Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another | Citibank Nonpriority Creditor's Name PO Box 6241 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only No Comenity Bank / NWYRK & Co Nopriority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only No Comenity Bank / NWYRK & Co Nopriority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Neproority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Neproority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt State claim subject to offset? Comenity Bank / Torrid Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debtor of the Code one. Debtor 1 and Debtor 2 only Nopriority Creditor's Name PO Box 182789 Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 9 only Debtor | Citibank |

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| ebtor 1 Courtney A. Upshaw | | Case number (if known) | |
|--|---|---|------------|
| Comenity Bank / Victoria's Sec | Last 4 digits of account number | 1930 | \$1,551.00 |
| Nonpriority Creditor's Name PO Box 182789 | When was the debt incurred? | Various dates in or before 2017 | |
| Columbus, OH 43218 | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | |
| Debtor 1 only | Пол | | |
| Debtor 2 only | ☐ Contingent ☐ Unliquidated | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | _ ` | | |
| ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | , | |
| ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | Other. Specify Credit card | l purchases | |
| Comenity Bank / Victoria's Sec | Last 4 digits of account number | 1250 | \$745.00 |
| Nonpriority Creditor's Name PO Box 182789 | When was the debt incurred? | Various dates in or before 2017 | |
| Columbus, OH 43218 | | <u> </u> | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | al alaim. | |
| At least one of the debtors and another | Student loans | d claim: | |
| ☐ Check if this claim is for a community debt | <u> </u> | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | diation agreement of divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | Other. Specify Credit card | l purchases | |
| Comenity Capital Bank/ The | Last 4 digits of account number | 5702 | \$878.00 |
| Nonpriority Creditor's Name | _ | | |
| PO Box 182120 Columbus, OH 43218 | When was the debt incurred? | Various dates in or before 2017 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separe report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | Other, Specify Credit card | | |
| ∟ 1€5 | Other Specify Circuit Cart | ı purvilases | |

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| Debtor | 1 Courtney A. Upshaw | | Case number (if known) | | | | |
|--------|---|--|---|------------|--|--|--|
| 4.1 | Comenity Capital Bank/ Ulta | Last 4 digits of account number | 5712 | \$1,197.00 | | | |
| 1 | Nonpriority Creditor's Name PO Box 182120 | When was the debt incurred? | Various dates in or before 2017 | Ψ1,101.00 | | | |
| | Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | | | | | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Contingent☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans | ration agreement or divorce that you did not | | | | |
| | Yes | ■ Other. Specify Credit card | purchases | | | | |
| 4.1 | Credit One Bank Nonpriority Creditor's Name | Last 4 digits of account number | 3221 | \$1,031.00 | | | |
| | PO Box 98872 Las Vegas, NV 89193 | When was the debt incurred? | Various dates in or before 2017 | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin ☐ Other. Specify ☐ Credit card | ration agreement or divorce that you did not g plans, and other similar debts | | | | |
| | | | | | | | |
| 4.1 3 | Nonpriority Creditor's Name PO Box 15316 Wilmington, DE 19850 Number Street City State Zip Code Who incurred the debt? Check one. | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim | Various dates in or before 2017 s: Check all that apply | \$731.00 | | | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes | report as priority claims Debts to pension or profit-sharing | ration agreement or divorce that you did not g plans, and other similar debts | | | | |
| | ■ res | ■ Other, Specify Credit card purchases | | | | | |

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| Debtor | Courtney A. Upshaw | | Case number (if known) | | | |
|----------|--|--|--|----------|--|--|
| 4.1 | JPMCB Card Services | Lord Barrello | 7633 | \$666.00 | | |
| 4 | Nonpriority Creditor's Name | Last 4 digits of account number | | \$000.00 | | |
| | PO Box 15369 | When was the debt incurred? | Various dates in or before 2017 | | | |
| | Wilmington, DE 19850 | | | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | <u> </u> | | | | | |
| | Debtor 1 only | Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | |
| | No | Debts to pension or profit-sharing | o plans, and other similar debts | | | |
| | Yes | | | | | |
| | ⊔ Yes | Other. Specify Credit card | purchases | | | |
| 4.1 | | | | 4000.00 | | |
| 5 | Merrick Bank Nonpriority Creditor's Name | Last 4 digits of account number | 8380 | \$823.00 | | |
| | PO Box 9201 | When was the debt incurred? | Various dates in or before 2017 | | | |
| | Old Bethpage, NY 11804 | | | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt | Obligations arising out of a sepa | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | Other. Specify Credit card | purchases | | | |
| | | | | | | |
| 4.1 6 | Mount Sinai FPA Radiology | Last 4 digits of account number | 8491 | \$49.00 | | |
| | Nonpriority Creditor's Name PO Box 5024 | When was the debt incurred? | Various dates in or before 2017 | | | |
| | New York, NY 10087 | _ | · | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt | | ration agreement or divorce that you did not | | | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | No | · | | | | |
| | ☐ Yes ■ Other Specify Medical bills | | | | | |

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| Debi | Courtney A. Upsnaw | | ise number (if known) | |
|----------|--|---|---|-----------------|
| 4.1 7 | Mount Sinai St Luke | Last 4 digits of account number | 5010 | \$140.00 |
| | Nonpriority Creditor's Name PO Box 95000-2193 | When was the debt incurred? | Various dates in or before 2017 | |
| | Philadelphia, PA 19195 Number Street City State Zip Code | As of the date you file, the claim is: | Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured of | laim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separate report as priority claims | ion agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharing p | plans, and other similar debts | |
| | ☐ Yes | Other. Specify Medical bills | | |
| 4.1 | Optimum | Last 4 digits of account number | 1032 | \$465.00 |
| 8 | Nonpriority Creditor's Name | | | V 100100 |
| | 1111 Stewart Avenue | When was the debt incurred? | Various dates in or before 2018 | |
| | Bethpage, NY 11714 | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: | Check all that apply | |
| | <u> </u> | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured o | laim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separate report as priority claims | ion agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharing | slane, and other similar debts | |
| | | | | |
| | Yes | Other. Specify Telephone bi | IIS | |
| 4.1 9 | Progressive Leasing | Last 4 digits of account number | | \$637.00 |
| | Nonpriority Creditor's Name 256 West Data Drive | When was the debt incurred? | Various dates in or before 2018 | |
| | Draper, UT 84020 Number Street City State Zip Code | As of the date you file, the claim is: | Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured c | laim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a separat | ion agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | 2 | |
| | ■ No | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | Yes | ■ Other Specify Credit Card F | urchases | |

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Case number (if known)

| DCD | Courtiley A. Opsilaw | | | |
|----------|--|---|---|-----------------|
| 4.2 0 | Second Round Stubs LLC | Last 4 digits of account number | | \$878.00 |
| | Nonpriority Creditor's Name 1701 Directors Blvd Ste 900 | When was the debt incurred? | Various dates on or about 2017 | |
| | Austin, TX 78744 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other. Specify Rental arre | ears | |
| 4.2 1 | Swiss Colony | Last 4 digits of account number | 5852 | \$176.00 |
| 1 | Nonpriority Creditor's Name | | | ******* |
| | 1112 7th Avenue | When was the debt incurred? | Various dates in or before 2017 | |
| | Monroe, WI 53566 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , | and apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit card | l purchases | |
| 4.2 | | | 0540 | * 404.00 |
| 2 | Syncb Nonpriority Creditor's Name | Last 4 digits of account number | 9542 | \$484.00 |
| | PO Box 965015 | When was the debt incurred? | Various dates in or before 2017 | |
| | Orlando, FL 32896 | _ | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | Obligations arising out of a separe report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharir | ng plans, and other similar debts | |
| | □ Yes | ■ Other, Specify Credit card | •• | |
| | | - Other Specify Sister Care | . p | |

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| Debtor | 1 Courtney A. Upshaw | | Case number (if known) | |
|-----------------|---|---|--|------------------------|
| 4.2 | US Department Of Education | Last 4 digits of account number | er 7879 | \$2,852.00 |
| | Nonpriority Creditor's Name 2401 International POB 7859 Madison, WI 53704 | When was the debt incurred? | Various dates in or before 2016 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | m is: Check all that apply | |
| | <u> </u> | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecu | red claim: | |
| | At least one of the debtors and another | ■ Student loans | | |
| | Check if this claim is for a community debt | ☐ Obligations arising out of a se | eparation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | _ | ring plans, and other similar debts | |
| | ☐ Yes | ☐ Other. Specify | | |
| 4.2 | WFFNB | Last 4 digits of account number | er <u>3528</u> | \$1,754.00 |
| | Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218 | When was the debt incurred? | Various dates in or before 2017 | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | m is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecu | red claim: | |
| | Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a se report as priority claims | eparation agreement or divorce that you did not | |
| | ■ No | <u> </u> | uring plans, and other similar debts | |
| | ☐ Yes | ■ Other Specify Credit ca | • | |
| | <u></u> | · · · | | |
| Part 3: | | • | | |
| is tryi have | ng to collect from you for a debt you owe to s | omeone else, list the original creditor at you listed in Parts 1 or 2, list the ac | it you already listed in Parts 1 or 2. For example, in Parts 1 or 2, then list the collection agency h Iditional creditors here. If you do not have additi | ere. Similarly, if you |
| | nd Address | On which entry in Part 1 or Part 2 did y | ou list the original creditor? | |
| | Funding | Line 4.12 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | |
| | gent Capital Services ox 10497 | | Part 2: Creditors with Nonpriority Unsecured Cla | iims |
| | ville, SC 29603 | | | |
| | | Last 4 digits of account number | | |
| | nd Address | On which entry in Part 1 or Part 2 did y | | |
| | olio Recovery orporate Blvd | Line 4.24 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Claims | |
| Suite | • | | Part 2: Creditors with Nonpriority Unsecured Cla | ims |
| Norfo | lk, VA 23502 | Last 4 digits of account number | | |
| | | Last 4 digits of account number | | |
| | nd Address Dlio Recovery | On which entry in Part 1 or Part 2 did y Line 4.2 of (<i>Check one</i>): | _ | |
| | orporate Blvd | Line in Olieck Olie). | ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims | |
| Suite | 100 | | — Tarr 2. Organiors with Montpholity Offsecured Ols | mno |
| Norto | lk, VA 23502 | Last 4 digits of account number | | |
| N=== | | | usu list the original or district | |
| | nd Address en Einstein & Associate | On which entry in Part 1 or Part 2 did y Line 4.20 of (<i>Check one</i>): | ou list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims | |
| - | | dule E/F: Creditors Who Have Unsecu | | Page 9 of 1 |
| | 555 E/i | ,a.to.ooo | | |

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| Debtor 1 Courtney A. Upshaw | | Case number (if known) |
|---|------------------------------------|---|
| 39 Broadway, Suite 1250 New York, NY 10006 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| | Last 4 digits of account number | |
| Name and Address | On which entry in Part 1 or Part 2 | 2 did you list the original creditor? |
| Sunrise Credit Services | Line 4.18 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims |
| PO Box 9100 Farmingdale, NY 11735 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims |
| g , | Last 4 digits of account number | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 2,852.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 16,827.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 19,679.00 |

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| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|--------------------------------------|
| Debtor 1 | Courtney A. Upsl | naw | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | - |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | - |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| | , | | 3. | | |

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| | | | Pa 29 of 52 | | |
|----------------|---|-------------------------------|-------------------------|---|--|
| Fill in this | s information to identify your | case: | | | |
| Debtor 1 | Courtney A. Ups | haw | | | |
| DODIO! 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, fi | ling) First Name | Middle Name | Last Name | | |
| United Sta | ates Bankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Case num | nher | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Officia | al Form 106H | | | | |
| Sched | dule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| | e and case number (if known) you have any codebtors? (If | | | e as a codebtor. | |
| ■ No | | | | | |
| | thin the last 8 years, have you na, California, Idaho, Louisiana | | | | states and territories include |
| ` | o. Go to line 3. | | | | |
| ☐ Ye | s. Did your spouse, former spo | use, or legal equivalent live | e with you at the time? | | |
| in lin Form | e 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed the | with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cred Check all schedules | ditor to whom you owe the debt s that apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| 0.1 | Name | | | ☐ Schedule E, line | |
| | | | | ☐ Schedule G, line | |
| | | | | | <u> </u> |
| | Number Street City | State | ZIP Code | | |
| | Oily | Cidio | 211 0000 | | |
| 3.2 | | | | ☐ Schedule D, line | |
| 0.2 | Name | | | Schedule E/F, lir | |
| | | | | ☐ Schedule G, line | |
| | | | | — Schedule G, IIIIe | · <u></u> |
| | Number Street City | State | ZIP Code | | |
| | , | | 0000 | | |

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| E:11 | | | | | | | | |
|-------------|---|------------------------------|-------------------------------------|-----------|-----------|-------------------|---|----|
| | in this information to identify your captor 1 Courtney A. | | | | | | | |
| | btor 2 | Орзнам | | | | | | |
| | ouse, if filing) | | | | _ | | | |
| Uni | ited States Bankruptcy Court for the | : SOUTHERN DISTRIC | T OF NEW YORK | | _ | | | |
| | se number | | | | | Check if this is: | | |
| (If Ki | nown) | | | | | ☐ An amende | ed filing ent showing postpetition chapter | - |
| | | | | | | | as of the following date: | |
| 0 | fficial Form 106I | | | | | MM / DD/ Y | ·YYY | |
| S | chedule I: Your Ince | ome | | | | | 12/ | 15 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. or the Describe Employment | r spouse is not filing wi | th you, do not include | e inforn | nation a | bout your spo | ouse. If more space is needed | |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | 2 or non-filing spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | ☐ Empl | oyed | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | | | ☐ Not e | mployed | |
| | employers. | Occupation | Teller | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Wells Fargo Bank | (| | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 143 Lennox Aven New York, NY 100 | | | | | |
| | | How long employed ti | here? 3 months | 8 | | | | |
| Pai | rt 2: Give Details About Mor | nthly Income | | | | | | |
| | mate monthly income as of the dause unless you are separated. | ate you file this form. If y | you have nothing to rep | ort for a | any line, | write \$0 in the | space. Include your non-filing | |
| | ou or your non-filing spouse have mo e space, attach a separate sheet to | | ombine the information | for all e | mployer | s for that perso | on on the lines below. If you nee | d |
| | | | | | For | r Debtor 1 | For Debtor 2 or non-filing spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3,025.23 | \$ N/A _ | |
| 3. | Estimate and list monthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ N/A | |

Official Form 106I Schedule I: Your Income page 1

Calculate gross Income. Add line 2 + line 3.

3,025.23

N/A

| Debt | or 1 | Courtney A. Upshaw | | Ca | se number (if known) | | | |
|------|---------------|---|-------|------|----------------------|------|-----------------------------------|----------|
| | | | | F | or Debtor 1 | | For Debtor 2 or non-filing spouse | |
| | Сор | y line 4 here | 4. | \$ | 3,025.23 | \$ | N/A | |
| 5. | List | all payroll deductions: | | | | | | |
| - | 5a. | Tax, Medicare, and Social Security deductions | 5a. | . \$ | 677.78 | \$ | ₿ N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | | \$ | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | | \$ | | |
| | 5d. | Required repayments of retirement fund loans | 5d. | . \$ | | \$ | N/A | |
| | 5e. | Insurance | 5e. | | | \$ | · | |
| | 5f. | Domestic support obligations | 5f. | \$ | | \$ | · | |
| | 5g. | Union dues | 5g. | | - 0.00 | | 1471 | |
| | 5h. | Other deductions. Specify: | _ 5h. | | | | · | |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 975.83 | \$ | | |
| 7. | Calc | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2,049.40 | \$ | N/A_ | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | | | \$ | | |
| | 8b. | Interest and dividends | 8b. | . \$ | 0.00 | \$ | N/A | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | | | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | | | \$ | | |
| | 8e. | Social Security | 8e. | . \$ | 0.00 | \$ | N/A_ | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | | \$ | | |
| | 8g. | Pension or retirement income | 8g. | | | \$ | 1471 | |
| | 8h. | Other monthly income. Specify: | _ 8h. | + \$ | 0.00 | + \$ | N/A | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 0.00 | \$ | \$N/A | |
| 10 | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | 2,049.40 + \$ | | N/A = \$ 2,049.4 | ın |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | _ | 2,043.40 | | | |
| 11. | Stat Inclu | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a | depe | | • | • | | 00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | 12. \$\$ | |
| 13. | Dov | you expect an increase or decrease within the year after you file this form | ? | | | | monthly income |) |
| | , | No. | | | | | | |
| | $\overline{}$ | Yes Explain: | | | | | | \neg |

Official Form 106l Schedule I: Your Income page 2

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| Fill | in this informa | tion to identify yo | our case: | | | | | | |
|------------|----------------------------|---|------------------|---|-----------------------|--------------|-------------------|---|----|
| Deb | tor 1 | Courtney A. | Upshaw | | | Ched | ck if this is: | | |
| Dah | tor 2 | | • | | | _ | An amended filing | dan marka ditta albandan | |
| | otor 2 ouse, if filing) | | | | | | 13 expenses as of | ving postpetition chapter the following date: | |
| Unit | ed States Bankr | uptcy Court for the | : SOUTH | IERN DISTRICT OF NEW | YORK | - | MM / DD / YYYY | | |
| Cas | e number | | | | | | | | |
| (If kı | nown) | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | |
| So | chedule | J: Your | Exper | nses | | | | 12/ | 15 |
| info | ormation. If m | | eded, atta | . If two married people ar ich another sheet to this n. | | | | | |
| Par | | ibe Your House | hold | | | | | | |
| 1. | Is this a join | | | | | | | | |
| | ■ No. Go to | | in a sonar | ate household? | | | | | |
| | □ res. Doe | | iii a sepai | ate nousenoiu: | | | | | |
| | | | st file Offici | al Form 106J-2, Expenses | s for Separate House | ehold of Deb | tor 2. | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | |
| ۷. | Do not list De | • | _ | Fill out this information for | Dependent's relati | ionshin to | Dependent's | Does dependent | |
| | Debtor 2. | ebioi i and | ☐ Yes. | each dependent | Debtor 1 or Debto | | age | live with you? | |
| | Do not state | the | | | | | | □ No | |
| | dependents | names. | | | | | | Yes | |
| | | | | | | | | □ No □ Yes | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | □ No | |
| | | | | | | | | ☐ Yes | |
| 3. | expenses of | enses include f people other t d your depende | han $_{\square}$ | No Yes | | | | | |
| Par | t 2: Estim | ate Your Ongoi | na Month | v Expenses | | | | | |
| Est exp | imate your ex | penses as of ye | our bankr | uptcy filing date unless y y is filed. If this is a supp | | | | | ! |
| Incl | luda avnansa | s naid for with I | non-cash | government assistance i | f you know | | | | |
| the | value of such | n assistance an | | cluded it on Schedule I: | | | Your expe | oneoe | |
| (Ott | ficial Form 10 | 61.) | | | | | Tour expe | 511363 | |
| 4. | | or home owners and any rent for th | | ses for your residence. I or lot. | nclude first mortgage | e 4. \$ | S | 929.00 | |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | 5 | 0.00 | |
| | 4b. Prope | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | S | 0.00 | |
| | | | • | upkeep expenses | | 4c. \$ | | 75.00 | |
| F | | owner's associat | | | ma aquite leeses | 4d. \$ | | 0.00 | |
| 5. | Additional n | nortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. \$ | D | 0.00 | |

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| Debtor 1 Co | ourtney A. Upshaw | Case num | ber (if known) | |
|---------------------|--|------------------------|--|--------------------------|
| 6. Utilities: | | | | |
| | ectricity, heat, natural gas | 6a. | \$ | 50.00 |
| | ater, sewer, garbage collection | 6b. | · - | 0.00 |
| | lephone, cell phone, Internet, satellite, and cable services | 6c. | · <u> </u> | 120.00 |
| | | 6d. | | |
| | her. Specify: Cable TV & Internet | | · | 80.00 |
| | d housekeeping supplies | 7. | · - | 600.00 |
| 3. Childcar | e and children's education costs | 8. | \$ | 0.00 |
| 6. Clothing | , laundry, and dry cleaning | 9. | \$ | 125.00 |
| 0. Personal | I care products and services | 10. | \$ | 175.00 |
| 1. Medical a | and dental expenses | 11. | \$ | 60.00 |
| | rtation. Include gas, maintenance, bus or train fare. | 12. | \$ | 275.00 |
| | clude car payments. | 13. | · | |
| | nment, clubs, recreation, newspapers, magazines, and books | | • | 0.00 |
| | le contributions and religious donations | 14. | > | 0.00 |
| 5. Insuranc | | | | |
| | clude insurance deducted from your pay or included in lines 4 or 20. | 45- | ¢ | 0.00 |
| | e insurance | 15a. | · | 0.00 |
| | alth insurance | 15b. | · | 0.00 |
| 15c. Ve | hicle insurance | 15c. | · · · ———————————————————————————————— | 0.00 |
| | her insurance. Specify: | 15d. | \$ | 0.00 |
| | o not include taxes deducted from your pay or included in lines 4 or 20. | _ | | |
| Specify: | | 16. | \$ | 0.00 |
| | ent or lease payments: | 47 | Φ. | 2.22 |
| | r payments for Vehicle 1 | 17a. | | 0.00 |
| | r payments for Vehicle 2 | 17b. | · | 0.00 |
| | her. Specify: | 17c. | | 0.00 |
| | her. Specify: | 17d. | \$ | 0.00 |
| | ments of alimony, maintenance, and support that you did not report | | \$ | 0.00 |
| | d from your pay on line 5, Schedule I, Your Income (Official Form 10) | וס. יוס. | | |
| - | yments you make to support others who do not live with you. | 19. | \$ | 0.00 |
| Specify: | al property expenses not included in lines 4 or 5 of this form or on S | | our Incomo | |
| | al property expenses not included in lines 4 or 5 of this form or on S ortgages on other property | scneaule I: Yo 20a. | | 0.00 |
| | | | | |
| | al estate taxes | 20b. | · | 0.00 |
| | operty, homeowner's, or renter's insurance | 20c. | | 0.00 |
| | aintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| 20e. Ho | meowner's association or condominium dues | 20e. | \$ | 0.00 |
| 1. Other: Տր | pecify: | 21. | +\$ | 0.00 |
| 2 Calculate | e your monthly expenses | | | |
| | lines 4 through 21. | | \$ | 2 400 00 |
| | • | 1.0 | | 2,489.00 |
| • • | y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J | 1-2 | \$ | |
| 22c. Add | line 22a and 22b. The result is your monthly expenses. | | \$ | 2,489.00 |
| 3. Calculate | e your monthly net income. | | | |
| | py line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,049.40 |
| | py your monthly expenses from line 22c above. | 23b. | | 2,489.00 |
| 20D. CO | py your monuny expenses nominine 226 above. | 230. | Ψ | ∠,409.00 |
| 23c Sul | btract your monthly expenses from your monthly income. | | | |
| | e result is your <i>monthly net income</i> . | 23c. | \$ | -439.60 |
| 711 | | | <u> </u> | |
| | expect an increase or decrease in your expenses within the year after | | | |
| | ole, do you expect to finish paying for your car loan within the year or do you expect | your mortgage | payment to increase | or decrease because of a |
| | on to the terms of your mortgage? | | | |
| ■ No. | | | | |
| ☐ Yes. | Explain here: | | | |

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| Fill in this | information to identify | your case: | | | | | | | | |
|--|--|--|----------------------------|-----------------------|--------------------------------------|--|--|--|--|--|
| Debtor 1 Courtney A. Upshaw | | | | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | | | | | | | |
| United Sta | tes Bankruptcy Court for | the: SOUTHERN DISTRI | CT OF NEW YORK | | | | | | | |
| Case num (if known) | ber | | | | ☐ Check if this is an amended filing | | | | | |
| | Form 106Dec Iration Abou | ıt an Individu | al Debtor's Sch | nedules | 12/15 | | | | | |
| You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below | | | | | | | | | | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | | | |
| | No | | | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) | | | | | | | | |
| Under that th | r penalty of perjury, I de ney are true and correct | clare that I have read the s | ummary and schedules filed | with this declaration | n and | | | | | |
| X /s | s/ Courtney A. Upshav | W | X | | | | | | | |
| С | ourtney A. Upshaw ignature of Debtor 1 | | Signature of De | ebtor 2 | | | | | | |
| | ate October 30, 2019 |) | Date | | | | | | | |

| | | ation to identify you | | | | | | | | | |
|------------|--|---|---|--|---|---|--|--|--|--|--|
| De | btor 1 | Courtney A. Ups | Shaw Middle Name | Last Name | | | | | | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | | | | | | |
| ` ' | | kruptcy Court for the: | | | | | | | | | |
| | | | | <u>-</u> | | | | | | | |
| 1 | se number | | | | | ☐ Check if this is an amended filing | | | | | |
| <u>O</u> 1 | ficial For | m 107 | | | | | | | | | |
| St | atement | of Financial | Affairs for Indivi | duals Filing for E | Bankruptcy | 4/1 | | | | | |
| info | ormation. If months in the second sec | ore space is needed). Answer every que | , attach a separate sheet to | are filing together, both are this form. On the top of an u Lived Before | | | | | | | |
| 1. | | current marital state | us? | | | | | | | | |
| | □ Married■ Not marr | | | | | | | | | | |
| 2. | During the la | ng the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | |
| | □ No | | | | | | | | | | |
| | _ | Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | | | | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior A | ddress: | Dates Debtor 2 lived there | | | | | |
| | 599 Morris Apartment Bronx, NY | 5E | From-To: 01/1990 to 06/2019 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: | | | | | |
| | es and territorie ■ No □ Yes. Mal | es include Arizona, Ca | alifornia, Idaho, Louisiana, No | evada, New Mexico, Puerto F | | rritory? (Community property and Wisconsin.) | | | | | |
| 4. | Fill in the total If you are filing | I amount of income yo | ou received from all jobs and | ng a business during this y all businesses, including par ve together, list it only once u | t-time activities. | calendar years? | | | | | |
| | | Debtor 1 Debtor 2 | | | | | | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | | | |

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Debtor 1 Courtney A. Upshaw Case number (if known)

| | | | | | | Debtor 1 | | | | | Debtor 2 | | |
|--|-------|---------------------|-------------------------|--------------------------|--|--|--|---|--|-------------------------------------|--|-----------------------------------|--|
| | | | | | | | of income I that apply. | | | | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | | | | ■ Wage bonuses, | s, commissions, | | \$30,265.0 | 0 | ☐ Wages, combonuses, tips | missions, | | | |
| | | | | | | ☐ Opera | ating a business | | | | ☐ Operating a | business | |
| / January 1 to December 31 2018) | | | | 31, 2018) | ■ Wage bonuses, | ges, commissions, \$34,572.00 es, tips | | | 0 | ☐ Wages, commissions, bonuses, tips | | | |
| | | | | | | ☐ Opera | ating a business | | | | ☐ Operating a | business | |
| | | | | | ore that: 31, 2017) | ■ Wage bonuses, | s, commissions, tips | | \$30,206.0 | 0 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | | | ☐ Opera | ating a business | | | | ☐ Operating a | business | |
| winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. | | | | | | | | | | | | | |
| | | | | | | Debtor 1 | | | | | Debtor 2 | | |
| | | | | | | | of income below. | each (befo | ss income from a source are deductions and asions) | d | Sources of inc Describe below. | | Gross income (before deductions and exclusions) |
| Pai | rt 3: | List | Certa | ain Pa | yments You | Made Bef | ore You Filed for | Bankru | ptcy | | | | |
| 6. | _ | ither No. | NeitI indiv Durir | her Deidual page the No. | btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include | personal, re you filed the control of the control o | family, or househod for bankruptcy, do not to whom you panot include payme to an attorney for the form of the form | umer de old purpo did you pa aid a total ents for de this bank | bts. Consumer dese." ay any creditor a to of \$6,825* or moormestic support of ruptcy case. | otal ore in bliga | of \$6,825* or mor one or more pay tions, such as ch | re? ments and thild support an | 1(8) as "incurred by an ne total amount you nd alimony. Also, do |
| * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. | | | | | | | | | | | | | |
| | | | Durir | ng the | 90 days befo | re you filed | d for bankruptcy, d | lid you pa | ay any creditor a to | otal | of \$600 or more? | | |
| | | | | | Go to line 7 | | | | | | | | |
| | | | | Yes | | ments for o | • • • | | | | | , , | creditor. Do not nclude payments to an |
| Creditor's Name and Address | | | | | Dates of payme | ent | Total amount | | Amount you still owe | Was this p | payment for | | |

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| Del | otor 1 | Courtney A. Upshaw | Pg 37 | of 52 | e number (if known) | | |
|-----|-----------------|--|---|---|----------------------|-------------------------------|--|
| 50 | 3101 1 | Courtiley A. Opsilaw | | | e namber (# known) | | |
| 7. | Inside of wh | n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny. | ortners; relatives of any general control, or owner of 20% or | eral partners; partner more of their voting | erships of which you | ou are a gener ny managing | ral partner; corporations agent, including one for |
| | | No Yes. List all payments to an insider. | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason fo | r this payment |
| 8. | insid | n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos | | nents or transfer a | iny property on a | eccount of a c | debt that benefited an |
| | _ | No Yes. List all payments to an insider | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | r this payment ditor's name |
| Pai | t 4: | Identify Legal Actions, Repossession | s and Foreclosures | | | | |
| 10. | Case Case | ications, and contract disputes. No Yes. Fill in the details. e title e number n 1 year before you filed for bankrupto k all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | Court or agency rty repossessed, fo | oreclosed, garnis | Status of t | |
| | Cred | litor Name and Address | Describe the Property | | Date | | Value of the property |
| | | | Explain what happened | | | | ргорону |
| 11. | accor | n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details. | | uding a bank or fir | nancial institution | n, set off any | amounts from your |
| | Cred | litor Name and Address | Describe the action the | creditor took | Date taker | action was า | Amount |
| 12. | court | n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a No Yes | | rty in the possessi | | | efit of creditors, a |
| Pai | t 5: | List Certain Gifts and Contributions | | | | | |
| 13. | Withi | n 2 years before you filed for bankrup | tcy, did you give any gifts | with a total value | of more than \$60 | 00 per person | 1? |
| | _ | No | - | | | • | |
| | □ ' | Yes. Fill in the details for each gift. | | | | | |

Person to Whom You Gave the Gift and Address:

per person

Official Form 107

Gifts with a total value of more than \$600

Describe the gifts

Value

Dates you gave the gifts

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17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who

No

П Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Nο

Yes. Fill in the details. П

Name of trust

Description and value of the property transferred

Date Transfer was made

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Debtor 1 Courtney A. Upshaw

Case number (if known)

| Pa | rt 8: | List of Certain Financial Accounts, In | struments, | Safe Deposi | it Boxes, and St | orage U | Inits | |
|-----|--------------|--|--|--|---------------------------------------|----------|--|---|
| 20. | solo Incl | d, moved, or transferred? lude checking, savings, money market, o | d for bankruptcy, were any financial accounts or instruments held in your name, or for you? noney market, or other financial accounts; certificates of deposit; shares in banks, credit u peratives, associations, and other financial institutions. | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of Financial Institution and dress (Number, Street, City, State and ZIP de) | Last 4 dig account n | | Type of according trument | unt or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| 21. | | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of Financial Institution Idress (Number, Street, City, State and ZIP Code) | Addr | else had ac ess (Number, S and ZIP Code) | | Descri | be the contents | Do you still have it? |
| 22. | Hav | ve you stored property in a storage unit | or place oth | er than you | r home within 1 | year be | efore you filed for bankruptc | y? |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of Storage Facility dress (Number, Street, City, State and ZIP Code) | to it? Addr | else has or ess (Number, s and ZIP Code) | | Descri | be the contents | Do you still have it? |
| Pa | rt 9: | Identify Property You Hold or Control | for Someo | ne Else | | | | |
| 23. | | you hold or control any property that so someone. | omeone else | owns? Incl | lude any proper | ty you b | porrowed from, are storing for | or, or hold in trust |
| | = | No | | | | | | |
| | Ow | Yes. Fill in the details. vner's Name | Whei | re is the pro | perty? | Descri | be the property | Value |
| | Ad | dress (Number, Street, City, State and ZIP Code) | (Numb Code) | er, Street, City, | State and ZIP | | | |
| Pa | rt 10: | Give Details About Environmental Inf | ormation | | | | | |
| For | the p | ourpose of Part 10, the following definiti | ions apply: | | | | | |
| | toxi | rironmental law means any federal, state ic substances, wastes, or material into t ulations controlling the cleanup of these | he air, land | , soil, surfac | e water, ground | | | |
| | | e means any location, facility, or propert own, operate, or utilize it, including disp | - | d under any | environmental l | aw, wh | ether you now own, operate | , or utilize it or used |
| | | zardous material means anything an env ardous material, pollutant, contaminant | | | as a hazardous | waste, | hazardous substance, toxic | substance, |
| Rep | ort a | all notices, releases, and proceedings th | at you know | v about, reg | ardless of wher | they o | ccurred. | |
| 24. | Has | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | | 1it Street, City, State and | | vironmental law, if you ow it | Date of notice |
| | | | | | | | | |

19-13553-smb Doc 1 Filed 11/05/19 Entered 11/05/19 08:03:51 Main Document Pg 40 of 52 Debtor 1 Courtney A. Upshaw Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 7IP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Courtney A. Upshaw Signature of Debtor 2 Courtney A. Upshaw Signature of Debtor 1 Date October 30, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 6

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Debtor 1 Courtney A. Upshaw

Case number (if known)

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| Fill in this infor | rmation to identify your c | ase: | | |
|---------------------------------|--|---------------------|---|---|
| Debtor 1 | Courtney A. Upsh | aw | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| | | | TRICT OF NEW YORK | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DIS | TRICT OF NEW YORK | |
| Case number | | | | Charlet Williams |
| (if known) | | | | Check if this is an amended filing |
| | | | | amonded ming |
| 000 | 400 | | | |
| Official Fo | orm 108 | | | |
| Stateme | nt of Intention | n for Indiv | viduals Filing Under Chapte | r 7 12/15 |
| | | | | |
| If you are an ind | dividual filing under chap | ter 7, you must fi | Il out this form if: | |
| creditors have | ve claims secured by you | ır property, or | | |
| • | sed personal property ar | | • | |
| | ever is earlier, unless the | | r you file your bankruptcy petition or by the date set ne time for cause. You must also send copies to the | |
| | | | | |
| | eople are filing together and date the form. | in a joint case, be | oth are equally responsible for supplying correct inf | ormation. Both debtors must |
| Sigil a | ind date the form. | | | |
| | | | s needed, attach a separate sheet to this form. On t | he top of any additional pages, |
| write y | your name and case num | iber (if Known). | | |
| Part 1: List Y | our Creditors Who Have | Secured Claims | | |
| 1 For any credit | itors that you listed in Da | rt 1 of Schedule I | D: Creditors Who Have Claims Secured by Property | (Official Form 106D) fill in the |
| information b | | it i di Schedule i | 5. Creditors who have Claims Secured by Property | (Official Form 100D), fill in the |
| Identify the cr | reditor and the property th | at is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| Creditor's | | | По на | П. |
| name: | | | ☐ Surrender the property. | □ No |
| name. | | | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a | □Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | t: | | | _ |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | □ N0 |
| | | | Retain the property and redeem to a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | t: | | · · · · · · · | = |
| Creditor's | | | ☐ Surrender the property. | □ No |
| name: | | | ☐ Retain the property and redeem it. | LI NO |
| | | | Retain the property and redeem it. Retain the property and enter into a | ☐ Yes |
| Description of | f | | Reaffirmation Agreement. | |
| property | | | ☐ Retain the property and [explain]: | |
| securing debt | t· | | | |

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ No

| Debtor 1 | Courtney A. Upshaw | Case number (if kr | nown) |
|---------------------------------------|--|--|--|
| name: Descrip property securing | y | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes |
| or any ur n the info | rmation below. Do not list real estate I | y Leases you listed in Schedule G: Executory Contracts and Unex eases. Unexpired leases are leases that are still in effec y lease if the trustee does not assume it. 11 U.S.C. § 365 | t; the lease period has not yet ended. |
| Describe | your unexpired personal property leas | ses | Will the lease be assumed? |
| Lessor's n Descriptio Property: | name: n of leased | | □ No |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No □ Yes |
| Lessor's n Descriptio Property: | name: n of leased | | □ No |
| | name: n of leased | | □ No |
| Property: Part 3: | Sign Below | | ☐ Yes |
| Jnder pen | | licated my intention about any property of my estate tha | at secures a debt and any personal |
| Cou | Courtney A. Upshaw rtney A. Upshaw ature of Debtor 1 | X Signature of Debtor 2 | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation | |
|------------|--------------------|--|
| \$245 | filing fee | |
| \$75 | administrative fee | |
| + \$15 | trustee surcharge | |
| \$335 | total fee | |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 19-13553-smb Doc 1 Filed 11/05/19 Entered 11/05/19 08:03:51 Main Document Pg 48 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

| In re | Courtney A. Upshaw | | Case No | | |
|-------|--|--|--|-----------------------------|-------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPENS | SATION OF ATTO | RNEY FOR D | EBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of contemplation | of the petition in bankruptcy | , or agreed to be pai | d to me, for services rende | red or to |
| | For legal services, I have agreed to accept | | \$ | 1,100.00 | |
| | Prior to the filing of this statement I have received | | | 0.00 | |
| | Balance Due | | \$ | 1,100.00 | |
| 2. | \$_335.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. ′ | The source of compensation to be paid to me is: | | | | |
| | ☐ Debtor ☐ Other (specify): ARAG | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compens | sation with any other persor | unless they are me | mbers and associates of my | / law firm. |
| | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names | | | | firm. A |
| 6. | In return for the above-disclosed fee, I have agreed to rende | er legal service for all aspec | ets of the bankruptcy | case, including: | |
| 1 | a. Analysis of the debtor's financial situation, and renderin b. Preparation and filing of any petition, schedules, statem c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] A per diem attorney may appear at the 341 greater than \$200.00 per appearance. They has not been nor will be charged any addit | ent of affairs and plan whic and confirmation hearing, a a Meeting of Creditors se fees will be paid from | h may be required; and any adjourned he and/or Confirmat n the firm's opera | earings thereof; | e of no |
| 7. | By agreement with the debtor(s), the above-disclosed fee de Representation of the debtors in any disch any other adversary proceeding. | | | ces, relief from stay ac | tions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of any apankruptcy proceeding. | greement or arrangement fo | or payment to me for | representation of the debte | or(s) in |
| O | october 30, 2019 | /s/ Daniel M. Kat | zner | | |
| | ate | Daniel M. Katzne | er 4305116 | | _ |
| | | Signature of Attorn The Law Offices | ey of Daniel M. Kata | ner, P.C. | |
| | | 1025 Longwood | Avenue | | |
| | | Bronx, NY 10459 (718) 589-3999 |)-5105 Fax: (347) 252-65 | 02 | |
| | | danielkatzner@y | • • | | _ |
| | | Name of law firm | | | |

United States Bankruptcy Court Southern District of New York

| | | Southern District of New York | | |
|------|--------------------------------------|---|-------------------|-----------------------|
| re | Courtney A. Upshaw | | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | VEDI | FICATION OF CREDITOR M | A TDIV | |
| | VERI | FICATION OF CREDITOR N | | |
| | | | | |
| abo | ove-named Debtor hereby verifies the | hat the attached list of creditors is true and co | rrect to the best | of his/her knowledge. |
| | | | | |
| ite: | October 30, 2019 | /s/ Courtney A. Upshaw | | |
| | | Courtney A. Upshaw | | |
| | | Signature of Debtor | | |

AT&T PO BOX 8212 AURORA, IL 60572

CAPITAL ONE PO BOX 30281 SALT LAKE CITY, UT 84130

CITIBANK
PO BOX 6241
SIOUX FALLS, SD 57117

COMENITY BANK / NWYRK & CO PO BOX 182789 COLUMBUS, OH 43218

COMENITY BANK / TORRID PO BOX 182789 COLUMBUS, OH 43218

COMENITY BANK / VICTORIA'S SEC PO BOX 182789 COLUMBUS, OH 43218

COMENITY CAPITAL BANK/ THE PO BOX 182120 COLUMBUS, OH 43218

COMENITY CAPITAL BANK/ ULTA PO BOX 182120 COLUMBUS, OH 43218

CREDIT ONE BANK PO BOX 98872 LAS VEGAS, NV 89193

DISCOVER FINANCIAL SERVICES PO BOX 15316 WILMINGTON, DE 19850

GETTINGTON
6250 RIDGEWOOD ROAD
SAINT CLOUD, MN 56303

JPMCB CARD SERVICES PO BOX 15369 WILMINGTON, DE 19850

LVNV FUNDING
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